



Accessing Early and Periodic Screening, Diagnosis, and Treatment Services (EPSDT)

Virginia Department of Medical
Assistance Services (DMAS)

November, 2007

What is EPSDT?

- Medicaid's program for children up to the age of 21 with a preventive treatment approach
- Diagnosis or screening services are the backbone of the program
- Referrals for treatment services occur during well child or other as needed screenings

What are EPSDT Services?

EPSDT services include:

- Screening/Well Child check-ups, lead testing and immunizations
- Other treatment services to correct a medical condition, make it better, or prevent the child's health status from worsening

Scope of Services

- Individualized health care, diagnostic services, and “treatment” as listed in the Federal Medicaid statute, must be provided when medically necessary to correct and ameliorate physical and mental conditions discovered during screening services whether or not included in the state plan
- The program does not cover services that are experimental or investigational

EPSDT Approval Criteria and Children's Services in Medicaid

- All requests for children's medical services are considered using EPSDT criteria for medical necessity
- Does the service “correct, ameliorate or maintain” the health or mental health condition of the child?
- All denials from KePRO or Managed Care must be based on usual program criteria and EPSDT criteria for medical necessity

EPSDT

Specialized Services

- Periodic, Inter-periodic or partial screenings may be used to document the need for EPSDT treatment
- Specialized Services are those which are not part of the approved Medicaid mandatory or optional services (defined in US code 1396d)

Specialized Services

- The following Services are covered only under EPSDT
- All Require pre authorization at DMAS
 - Specialized Medical Treatment Services
 - Hearing Aids
 - Specialized and Substance Abuse Residential Treatment
 - (MCO Exclusion, request services at KePRO/DMAS)
 - Personal Care
 - (MCO Carve out, request services at DMAS)
 - Private Duty Nursing

Medical Necessity (cont.)

- The medical justification for a service must accompany the request for EPSDT treatment services.
- Certain services may not be covered by EPSDT
 - Respite
 - Environmental Modifications
 - Vocational
 - Educational



Specific Program Guidelines



Hearing/Audiology Services

New Program begins January, 2008

Covered Hearing Services

- Analog and digital hearing aids are covered
- FM amplification systems are covered as necessary to aid language development
- Cochlear implants are covered for all ages
- New Hearing Program
 - Effective January 1, 2008

Referral Process

- Preauthorization is required for digital hearing aids, all non Behind the Ear (BTE) type hearing aids and FM systems
- Preauthorization is not required for analog “BTE” style hearing aids



Personal Care

Personal Care

- The services will be provided to those individuals who have documented medical necessity for such care as a means to assist in maintaining and/or improving health status. Services are based on medical necessity and will not take the place of informal support systems.

Personal Care Criteria

- ADL dependency in three areas is mandatory to require personal care
- Care need is not solely due to normal developmental milestones

Personal Care Referrals

- DMAS-7 is used for MD referral and assessment
- Send completed DMAS 7 to Specialized Services Unit
 - DMAS @ (804)786-0342
- DMAS will refer to Waivers and Community- Based case management services if no case manager is available to the enrollee



EPSDT Nursing

Refer to the EPSDT Nursing Manual

EPSDT Nursing

- EPSDT nursing is deemed medically necessary by the attending physician
- EPSDT nursing can provide for assessing and providing interventions, maintaining nursing care and communicating with the physician regarding changes in the individual's medical status.

EPSDT Nursing

Persons who are eligible for nursing services are individuals who:

- Require the skilled intervention or medical monitoring from a medical professional in order to maintain physical health or to prevent imminent physical harm.

EPSDT Nursing Coverage

- EPSDT Nursing is a covered service in both the FFS and MCO networks
- Technology Assisted Waiver referrals may be made for some EPSDT nursing cases



EPSDT Residential

EPSDT Residential Cases

EPSDT Residential Treatment

- 1) KePRO Reviews RTC
- 2) DMAS Reviews any cases that KePRO cannot approve
- 3) MCO recipients who enter RTC are disenrolled from the MCO

“Level C” Residential Treatment (RTC)

Provides treatment for severe mental, emotional and behavioral disorders

- Inpatient
- 24-hours per day
- Specialized care
- Highly organized
- Intensive
- Planned therapeutic interventions

EPSDT Case Examples

Conditions served through EPSDT:

- Severe Behavioral problems and health problems associated with:
 - Autism
 - Brain Injury
 - Eating Disorders
(when inpatient treatment is necessary)
 - Chronic Illnesses that require inpatient treatment
 - Substance Abuse Disorders

American Society of Addictions Medicine (ASAM)

- DMAS currently uses ASAM patient placement criteria to determine clinical treatment levels and determine “medical necessity”
- MCO’s may use different placement criteria



FFS Pre-Auth Timeline

- DMAS processes all *typical* requests within 3-5 business days
- Approval notices are sent via MMIS mailings or by fax with special billing instructions for unusual service approvals
- Some services may require a specialized provider contract to complete the approval
- MCO's use their own PA processes

EPSDT Contacts

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www.dmas.virginia.gov/ch-home.htm

EPSDT Contacts

Managed Care Helpline for MEDALLION
and Medallion II (MCO) Enrollees

1-800-643-2273

DMAS website www.dmas.virginia.gov